

Nixon Peabody LLP

Attorneys at Law

Suite 900
401 9th Street, N.W.
Washington, D.C. 20004-2128
(202) 585-8000

Fax: (202) 585-8080

PRIVILEGE AND CONFIDENTIALITY NOTICE

The information in this fax is intended for the named recipients only. It contains privileged and confidential matter. If you have received this fax in error, please notify us immediately by a collect telephone call to (202) 585-8000 and return the original to the sender by mail. We will reimburse you for postage. Do not disclose the contents to anyone. Thank you.

FAX

To:	Company	Fax #:	Telephone #:
1) Technology Center	USPTO	703-872-9306	
2)			

INTERNATIONAL PHONE NUMBERS MUST INCLUDE COUNTRY & CITY CODE. SEE LOCAL WHITE PAGES FOR CODES NEEDED.

From: Raymond Van Dyke	Date: January 9, 2004 February 10, 2005	No. of Pages: 3 (including this page)	Client/Matter: 031896-026000
------------------------	--	--	------------------------------

Comments:

Re: U.S. Patent App. No. 10/718,834

Filed: November 21, 2003

Inventor(s): Margo O'Toole, et al.

Title: Composition and Method For Treating Lupus NephritisAttached please find:

Transmittal Sheet

Power to Inspect

**RECEIVED
CENTRAL FAX CENTER**

FEB 10 2005

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office: Fax No. (703) 872-9306 on February 10, 2005.


Raymond Van Dyke
☐ First Class Mail☐ Overnight Mail

Original of the transmitted document will be sent by:

☐ Hand Delivery☐ This transmission will be the only form of delivery of this document

IF YOU DO NOT RECEIVE ALL OF THESE PAGES, PLEASE CONTACT THE FAX OPERATOR AS SOON AS POSSIBLE AT: (202) 585-8000. THANK YOU.

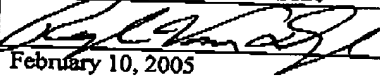
CONFIRMATION: DATE SENT _____ TIME _____ BY _____


To:	Company	Fax #:	Telephone #:
1) Customer Service Branch	USPTO	703872-6390	
2)			
3)			

INTERNATIONAL PHONE NUMBERS MUST INCLUDE COUNTRY & CITY CODE. SEE LOCAL WHITE PAGES FOR CODES NEEDED.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/718,834
		Filing Date	November 21, 2003
		First Named Inventor	Margo O'Toole et al.
		Group Art Unit	To be assigned
		Examiner Name	To be assigned
Total Number of Pages in This Submission	2	Attorney Docket Number	031896-091000

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Power To Inspect
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Raymond Van Dyke (Reg. No. 34,746) Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	February 10, 2005

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) 872-9306	
<u>February 10, 2005</u> Date	 Signature <u>Raymond Van Dyke</u> Typed or printed name

Atty. Docket No. 031896-091000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re UTILITY application ofMargo O'Toole *et al.*

Application No.: 10/718,834

Filed: November 21, 2003

For: COMPOSITION AND METHOD FOR
TREATING LUPUS NEPHRITIS

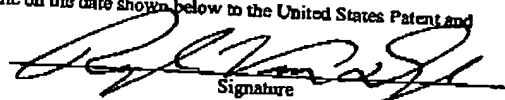
Group Art Unit: To be Assigned

Examiner: To be Assigned

RECEIVED
CENTRAL FAX CENTER

FEB 10 2005

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and
Trademark Office at (703) 872-9306.February 10, 2005
Date
Signature

Raymond Van Dyke

POWER TO INSPECT PURSUANT TO 37 C.F.R. 1.14(d)Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

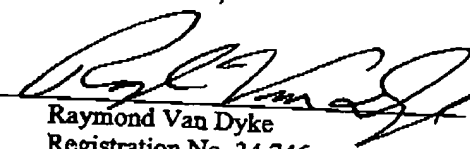
Sir:

Applicants hereby grant Kitty Huffman the power to inspect the above-identified application. Although Applicants believe that no fee is due, the Commissioner is hereby authorized to charge any payment deficiency to Deposit Account No. 19-2380 (031896-091000).

Respectfully submitted,

Date: February 10, 2005

By:


Raymond Van Dyke
Registration No. 34,746NIXON PEABODY, LLP
401 9th Street, N.W.
Suite 900
Washington, DC 20004-2128
(202) 585-8000